

**Fill in this information to identify the case:**

Debtor name	V & D Wholesale, Inc.
United States Bankruptcy Court for the: Eastern District of New York	
Case number (If known):	_____

Check if this is an amended filing

**Official Form 206A/B****Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- No. Go to Part 2.  
 Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
2. Cash on hand			\$ 0.00
3. Checking, savings, money market, or financial brokerage accounts ( <i>Identify all</i> )			
Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. _____	_____	_____	\$ 0.00
3.2. _____	_____	_____	\$ 0.00
4. Other cash equivalents ( <i>Identify all</i> )			
4.1. _____			\$ 0.00
4.2. _____			\$ _____
5. Total of Part 1			\$ _____

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- No. Go to Part 3.  
 Yes. Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. _____	\$ _____
7.2. _____	\$ _____

Debtor \_\_\_\_\_

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. _____	\$ 0.00
8.2. _____	\$ _____

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ 0.00

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?** No. Go to Part 4. Yes. Fill in the information below.**Current value of debtor's interest****11. Accounts receivable**

11a. 90 days old or less:	face amount	- doubtful or uncollectible accounts	= ..... →	\$ _____
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11b. Over 90 days old:	face amount	- doubtful or uncollectible accounts	= ..... →	\$ _____
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**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ \_\_\_\_\_

**Part 4: Investments****13. Does the debtor own any investments?** No. Go to Part 5. Yes. Fill in the information below.**Valuation method used for current value****Current value of debtor's interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. _____	_____	\$ _____
14.2. _____	_____	\$ _____

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. _____	%	_____	\$ _____
15.2. _____	%	_____	\$ _____

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. _____	_____	\$ _____
16.2. _____	_____	\$ _____

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

Debtor V & D Wholesale, Inc.  
Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- No. Go to Part 6.  
 Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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**19. Raw materials**

\_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ \_\_\_\_\_

**20. Work in progress**

\_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ \_\_\_\_\_

**21. Finished goods, including goods held for resale**

\_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ \_\_\_\_\_

**22. Other inventory or supplies**

\_\_\_\_\_ MM / DD / YYYY \$ \_\_\_\_\_ \$ \_\_\_\_\_

**23. Total of Part 5**

Add lines 19 through 22. Copy the total to line 84.

\$ \_\_\_\_\_

**24. Is any of the property listed in Part 5 perishable?**

- No  
 Yes

**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- No  
 Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

**26. Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- No  
 Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)****27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- No. Go to Part 7.  
 Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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**28. Crops—either planted or harvested**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**29. Farm animals** Examples: Livestock, poultry, farm-raised fish

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**30. Farm machinery and equipment** (Other than titled motor vehicles)

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**31. Farm and fishing supplies, chemicals, and feed**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**32. Other farming and fishing-related property not already listed in Part 6**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Debtor

**V & D Wholesale, Inc.**

Name

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**33. Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$0

**34. Is the debtor a member of an agricultural cooperative?** No Yes. Is any of the debtor's property stored at the cooperative? No Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?** No Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_**36. Is a depreciation schedule available for any of the property listed in Part 6?** No Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?** No Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?** No. Go to Part 8. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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**39. Office furniture**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**40. Office fixtures**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**41. Office equipment, including all computer equipment and communication systems equipment and software**

\_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**42. Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1 \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

42.2 \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

42.3 \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**43. Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ \_\_\_\_\_

**44. Is a depreciation schedule available for any of the property listed in Part 7?** No Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?** No Yes

Debtor

V &amp; D Wholesale, Inc.

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Case number (if known) \_\_\_\_\_

**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?** No. Go to Part 9. Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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**47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

**48. Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

**49. Aircraft and accessories**

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

**50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

_____	\$ _____	_____	\$ _____
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**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$ \_\_\_\_\_

**52. Is a depreciation schedule available for any of the property listed in Part 8?**

- No  
 Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- No  
 Yes

Debtor

**V & D Wholesale, Inc.**

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 9: Real property****54. Does the debtor own or lease any real property?** No. Go to Part 10. Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 _____	_____	\$ _____	_____	\$ _____
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ \_\_\_\_\_

**57. Is a depreciation schedule available for any of the property listed in Part 9?** No Yes**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?** No Yes**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?** No. Go to Part 11. Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets _____	\$ _____	_____	\$ _____
61. Internet domain names and websites _____	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties _____	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations _____	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property _____	\$ _____	_____	\$ _____
65. Goodwill _____	\$ _____	_____	\$ _____
<b>66. Total of Part 10.</b> Add lines 60 through 65. Copy the total to line 89.	\$ _____		

Debtor \_\_\_\_\_

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**67. Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No  
 Yes

**68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- No  
 Yes

**69. Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- No  
 Yes

**Part 11: All other assets****70. Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.  
 Yes. Fill in the information below.

**Current value of  
debtor's interest****71. Notes receivable**

Description (include name of obligor)

\_\_\_\_\_- Total face amount      = →      \$ \_\_\_\_\_

doubtful or uncollectible amount

\$ 0.00

**72. Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Tax year \_\_\_\_\_ \$ 0.00  
Tax year \_\_\_\_\_ \$ 0.00  
Tax year \_\_\_\_\_ \$ 0.00**73. Interests in insurance policies or annuities**\_\_\_\_\_  
\$ 0.00**74. Causes of action against third parties (whether or not a lawsuit has been filed)**\_\_\_\_\_  
\$ 0.00Nature of claim \_\_\_\_\_  
Amount requested \$ \_\_\_\_\_**75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**\_\_\_\_\_  
\$ 0.00Nature of claim \_\_\_\_\_  
Amount requested \$ \_\_\_\_\_**76. Trusts, equitable or future interests in property**\_\_\_\_\_  
\$ 0.00**77. Other property of any kind not already listed** Examples: Season tickets, country club membership\_\_\_\_\_  
\$ 0.00  
\$ 0.00**78. Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$ 0.00

**79. Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- No  
 Yes

Debtor

V &amp; D Wholesale, Inc.

Name

Case number (if known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 0.00	
81. Deposits and prepayments. Copy line 9, Part 2.	\$ 0.00	
82. Accounts receivable. Copy line 12, Part 3.	\$ 0.00	
83. Investments. Copy line 17, Part 4.	\$ 0.00	
84. Inventory. Copy line 23, Part 5.	\$ 0.00	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$ 0.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 0.00	
88. Real property. Copy line 56, Part 9. . . . . →	\$ 0.00	\$ 0.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00	
90. All other assets. Copy line 78, Part 11.	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ 0.00	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. 0.00		\$ 0.00

**Fill in this information to identify the case:**

Debtor V & D Wholesale, Inc.  
 United States Bankruptcy Court for the: Eastern District of New York  
 Case number (If known)

Check if this is an amended filing

**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

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Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).**

- No. Go to Part 2.  
 Yes. Go to line 2.

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**

	Total claim	Priority amount
<b>2.1 Priority creditor's name and mailing address</b>  _____ _____ _____  Date or dates debt was incurred  _____  Last 4 digits of account number _____  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<b>As of the petition filing date, the claim is:</b> \$ <u>0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____
<b>2.2 Priority creditor's name and mailing address</b>  _____ _____ _____  Date or dates debt was incurred  _____  Last 4 digits of account number _____  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<b>As of the petition filing date, the claim is:</b> \$ <u>0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>0.00</u>
<b>2.3 Priority creditor's name and mailing address</b>  _____ _____ _____  Date or dates debt was incurred  _____  Last 4 digits of account number _____  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<b>As of the petition filing date, the claim is:</b> \$ <u>0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____

Debtor

V &amp; D Wholesale, Inc.

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. _____ Priority creditor's name and mailing address	\$ 0.00	\$ 0.00
<p><b>As of the petition filing date, the claim is:</b>  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>		
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
2. _____ Priority creditor's name and mailing address	\$ 0.00	\$ _____
<p><b>As of the petition filing date, the claim is:</b>  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>		
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
2. _____ Priority creditor's name and mailing address	\$ 0.00	\$ _____
<p><b>As of the petition filing date, the claim is:</b>  <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>		
Date or dates debt was incurred	Basis for the claim:	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)	<input type="checkbox"/> No <input type="checkbox"/> Yes	

**Fill in this information to identify the case:**

# V & D Wholesale, Inc.

United States Bankruptcy Court for the: Eastern District of New York

Case number (If known): \_\_\_\_\_

Check if this is an amended filing

**Official Form 206H**

## Schedule H: Codebtors

12/15

**Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.**

**1. Does the debtor have any codebtors?**

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor			Column 2: Creditor		
Name	Mailing address		Name		Check all schedules that apply:
2.1	_____ Street _____		_____ _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.2	_____ Street _____		_____ _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.3	_____ Street _____		_____ _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.4	_____ Street _____		_____ _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.5	_____ Street 570-46 Street Brooklyn, New York 11220		Irvin Iglesia Ortega		<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.6	_____ Street 244 Fifth Avenue, Suite F276 New York NY 10001		Berlingieri Law, PLLC		<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				

Debtor

**V & D Wholesale, Inc.**

Name

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**Additional Page if Debtor Has More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2. _____	Street _____ _____ _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____ _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____ _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____ _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____ _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____ _____ _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____ _____ _____ _____	Iglesisa v. V & D Wholesale Inc.	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		

**Fill in this information to identify the case:**

Debtor name	V & D Wholesale, Inc.
United States Bankruptcy Court for the:	Eastern District of New York
	(State)
Case number (If known):	_____

Check if this is an amended filing

**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>MM / DD / YYYY</u>	to Filing date	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other <u>0.00</u>	\$ <u>0.00</u>
<b>For prior year:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other <u>0.00</u>	\$ <u>0.00</u>
<b>For the year before that:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ _____

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>MM / DD / YYYY</u>	to Filing date	_____	\$ _____
<b>For prior year:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	_____	\$ _____
<b>For the year before that:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	_____	\$ <u>0.00</u>

Debtor V & D Wholesale, Inc. Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1. Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street _____ _____	0.00		
City _____ State _____ ZIP Code _____	_____		
3.2. Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street _____ _____	_____		
City _____ State _____ ZIP Code _____	_____		

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____	_____	\$ _____	_____
Street _____ _____	_____		_____
City _____ State _____ ZIP Code _____	_____		_____
<b>Relationship to debtor</b> _____			
4.2. Insider's name _____	570-46 Street	\$ _____	_____
Street _____ 244 Fifth Avenue, Suite F276	Brooklyn, New York		_____
City _____ State _____ ZIP Code _____	_____		_____
<b>Relationship to debtor</b> _____			

**Debtor**

V & D Wholesale, Inc.

Name

Case number (if known) \_\_\_\_\_

## **5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

-□ None

Creditor's name and address	Description of the property	Date	Value of property
5.1.			
Creditor's name			\$ _____
Street			
_____			
City	State	ZIP Code	
5.2.			
Creditor's name			\$ _____
Street			
_____			
City	State	ZIP Code	

## 6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

- □ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name			\$ _____
Street			
City	State	ZIP Code	Last 4 digits of account number: XXXX- _____

### **Part 3: Legal Actions or Assignments**

#### **7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

<b>Case title</b>	<b>Nature of case</b>	<b>Court or agency's name and address</b>	<b>Status of case</b>
7.1. Iglesisa v. V & D Wholesale Inc.	FSLA, NYLL	United States District Court, EDNY Name _____ Street _____ _____	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
<b>Case number</b>		City _____ State _____ ZIP Code _____	
1:19-cv-05541 (MKB-RLM)			
<b>Case title</b>	<b>Court or agency's name and address</b>	<b>Status of case</b>	
7.2. _____	Name _____ Street _____ _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded	
<b>Case number</b>	City _____ State _____ ZIP Code _____		
_____			

Debtor

**V & D Wholesale, Inc.**

Name

Case number (if known) \_\_\_\_\_

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None

Custodian's name and address	Description of the property	Value
Custodian's name		\$ _____
Street	Case title	Court name and address
_____	_____	_____
City State ZIP Code	Case number	Name Street _____
	Date of order or assignment	City State ZIP Code
		_____

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000** None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$ _____
Street			
_____	_____	_____	
City State ZIP Code			
Recipient's relationship to debtor			
_____	_____	_____	
9.2. Recipient's name			\$ _____
Street			
_____	_____	_____	
City State ZIP Code			
Recipient's relationship to debtor			
_____	_____	_____	

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.** None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.		
	List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		
_____	_____	_____	\$ _____
_____	_____	_____	

Debtor

**V & D Wholesale, Inc.**

Name

Case number (if known) \_\_\_\_\_

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Pacheco & Lugo, PLLC  Address  340 Atlantic Avenue Street  Brooklyn, NY 11201 City                  State                  ZIP Code			\$ _____
	Email or website address  cpacheco@pachecolugo.com			
	Who made the payment, if not debtor?	Sindha Mahendrasinh		
	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.				\$ _____
	Address  Street  City                  State                  ZIP Code			
	Email or website address  _____			
	Who made the payment, if not debtor?	_____		

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
Trustee  _____	_____	_____	\$ _____

Debtor V & D Wholesale, Inc.  
Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
------------------------	--	------------------------	-----------------------

13.1. \_\_\_\_\_ \$ \_\_\_\_\_

**Address**

Street  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Relationship to debtor**

\_\_\_\_\_

**Who received transfer?**

\_\_\_\_\_ 0 \$ \_\_\_\_\_

13.2. \_\_\_\_\_

**Address**

Street  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Relationship to debtor**

\_\_\_\_\_

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
---------	--------------------

14.1. \_\_\_\_\_  
Street  
\_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

14.2. \_\_\_\_\_  
Street  
\_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

### **Part 8: Health Care Bankruptcies**

#### **15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

#### Facility name and address

#### Nature of the business operation, including type of services the debtor provides

#### If debtor provides meals and housing, number of patients in debtor's care

15.1.

Facility name \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Street \_\_\_\_\_

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

#### Nature of the business operation, including type of services the debtor provides

#### If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Street \_\_\_\_\_

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- Electronically
- Paper

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

### **Part 9: Personally Identifiable Information**

#### **16. Does the debtor collect and retain personally identifiable information of customers?**

No.

Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

- No
- Yes

#### **17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

Name of plan \_\_\_\_\_

Employer identification number of the plan \_\_\_\_\_

EIN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Has the plan been terminated?

- No
- Yes

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**
**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	JPMorgan Chase Name P.O. Box 18251 Street  Columbus, OH 43218 City      State      ZIP Code	XXXX- <u>6</u> <u>1</u> <u>2</u> <u>0</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	3/03/2020	\$ <u>3,283.72</u>
18.2.	Name  Street  City      State      ZIP Code	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other n/a	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Street	_____	_____	
City      State      ZIP Code	Address _____	_____	

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Street	_____	_____	
City      State      ZIP Code	Address _____	_____	

Debtor V & D Wholesale, Inc. Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

### **Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

#### **21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____			

### **Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

#### **22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

#### **23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____ Street _____ City _____ State _____ ZIP Code _____	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____

Debtor V & D Wholesale, Inc. Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- No  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	10001	_____

**Part 13: Details About the Debtor's Business or Connections to Any Business**

**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ - _____ - _____ <b>Dates business existed</b> From _____ To _____
25.2. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ - _____ - _____ <b>Dates business existed</b> From _____ To _____
25.3. Name _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ - _____ - _____ <b>Dates business existed</b> From _____ To _____

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address		Dates of service	
26a.1. Tayal Rajesh Name S Grover, CPA, PLLC Street 183 Broadway Suite 208 Hicksville, NY 11801 City		From 2015	To 2019
State	ZIP Code		

Name and address		Dates of service	
26a.2. _____ Name Street _____		From _____	To _____
City	State	ZIP Code	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address		Dates of service	
26b.1. _____ Name Street _____		From _____	To _____
City	State	ZIP Code	

Name and address		Dates of service	
26b.2. _____ Name Street _____		From _____	To _____
City	State	ZIP Code	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address		If any books of account and records are unavailable, explain why	
26c.1. Tayal Rajesh Name S Grover, CPA, PLLC Street 183 Broadway Suite 208 Hicksville, NY 11801 City		_____ _____ _____	
State	ZIP Code		

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

**Name and address****If any books of account and records are unavailable, explain why**

26c.2.

Name \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None**Name and address**

26d.1.

Name \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**Name and address**

26d.2.

Name \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

 No Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

\$ \_\_\_\_\_

**Name and address of the person who has possession of inventory records**

27.1.

Name \_\_\_\_\_

Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor

V &amp; D Wholesale, Inc.

Name

Case number (if known)

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
_____	_____	\$ _____

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

 No Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Mahgnadrasinh Sindha	5305 4th Avenue, Brooklyn, NY 11220	Pres. 100%	From 08/2003 To 09/2019
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____
_____	_____	_____	From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

 No Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
Sindha Mahgnadrasinh Name 5305 4th Avenue Street Brooklyn, NY 11220 City _____ State _____ ZIP Code _____	\$1,060.00	9/2019	Salary _____
Relationship to debtor President	_____	_____	_____

Debtor V & D Wholesale, Inc. Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**Name and address of recipient**

30.2 \_\_\_\_\_

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Relationship to debtor**

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

Yes. Identify below.

**Name of the parent corporation** \_\_\_\_\_ **Employer Identification number of the parent corporation** \_\_\_\_\_

EIN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No

Yes. Identify below.

**Name of the pension fund** \_\_\_\_\_ **Employer Identification number of the pension fund** \_\_\_\_\_

EIN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 09/11/2020  
 MM / DD / YYYY

✗

Printed name Mahendrasinh Sindha

Signature of individual signing on behalf of the debtor

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No  
 Yes

Debtor

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<b>3.1</b>	Nonpriority creditor's name and mailing address Irvin Iglesia Ortega 570-46 Street Brooklyn, New York 11220	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> Wages
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<b>3.2</b>	Nonpriority creditor's name and mailing address Berlingieri Law, PLLC 244 Fifth Avenue, Suite F276 New York, New York 10001	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> Attorney Services
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.3</b>	Nonpriority creditor's name and mailing address _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.4</b>	Nonpriority creditor's name and mailing address _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.5</b>	Nonpriority creditor's name and mailing address _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
<b>3.6</b>	Nonpriority creditor's name and mailing address _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____
	Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor

V &amp; D Wholesale, Inc.

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. _____	Nonpriority creditor's name and mailing address  _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3. _____	Nonpriority creditor's name and mailing address  _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3. _____	Nonpriority creditor's name and mailing address  _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
3. _____	Nonpriority creditor's name and mailing address  _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	

Debtor

V &amp; D Wholesale, Inc.

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 3:****List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.2. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.3. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
41. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.5. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.6. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.7. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.8. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.9. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.10. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4.11. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____

Debtor

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 3: Additional Page for Others to Be Notified About Unsecured Claims**

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____
4. _____	Line _____ <input type="checkbox"/> Not listed. Explain _____ _____	_____

Fill in this information to identify the case:

Debtor name	V & D Wholesale, Inc.
United States Bankruptcy Court for the: Eastern District of New York	
Case number (If known):	Chapter _____

Check if this is an amended filing

## Official Form 206G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.2	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.3	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.4	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____
2.5	State what the contract or lease is for and the nature of the debtor's interest	_____	_____
	State the term remaining	_____	_____
	List the contract number of any government contract	_____	_____

Debtor

**V & D Wholesale, Inc.**

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____
2. _____	State what the contract or lease is for and the nature of the debtor's interest _____ _____	State the term remaining _____ _____	List the contract number of any government contract _____ _____

**Fill in this information to identify the case:**

# V & D Wholesale, Inc.

United States Bankruptcy Court for the: Eastern District of New York

Case number (If known): \_\_\_\_\_

Check if this is an amended filing

**Official Form 206H**

## Schedule H: Codebtors

12/15

**Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.**

**1. Does the debtor have any codebtors?**

- No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column

Column 1: Codebtor			Column 2: Creditor		
Name	Mailing address		Name		Check all schedules that apply:
2.1	_____  Street  _____		_____  _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.2	_____  Street  _____		_____  _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.3	_____  Street  _____		_____  _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.4	_____  Street  _____		_____  _____		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.5	_____  Street  _____		_____  _____		<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				
2.6	_____  Street  _____		_____  _____		<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____				

Debtor

**V & D Wholesale, Inc.**

Name

Case number (if known) \_\_\_\_\_

**Additional Page if Debtor Has More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		
2. _____	Street _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
	City _____ State _____ ZIP Code _____		

**Fill in this information to identify the case:**

Debtor name	V & D Wholesale, Inc.
United States Bankruptcy Court for the:	Eastern District of New York
	(State)
Case number (If known):	_____

Check if this is an amended filing

**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**

None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year			Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>MM / DD / YYYY</u>	to Filing date	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>0.00</u>
<b>For prior year:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ <u>0.00</u>
<b>For the year before that:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>	<input type="checkbox"/> Operating a business <input type="checkbox"/> Other _____	\$ _____

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None

			Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
<b>From the beginning of the fiscal year to filing date:</b>	From <u>MM / DD / YYYY</u>	to Filing date		\$ _____
<b>For prior year:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>		\$ _____
<b>For the year before that:</b>	From <u>MM / DD / YYYY</u>	to <u>MM / DD / YYYY</u>		\$ <u>0.00</u>

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street _____	_____		
City _____ State _____ ZIP Code _____	_____		
3.2. Creditor's name _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
Street _____	_____		
City _____ State _____ ZIP Code _____	_____		

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____	_____	\$ _____	_____
Street _____	_____		_____
City _____ State _____ ZIP Code _____	_____		_____
<b>Relationship to debtor</b> _____			
4.2. Insider's name _____	_____	\$ _____	_____
Street _____	_____		_____
City _____ State _____ ZIP Code _____	_____		_____
<b>Relationship to debtor</b> _____			

Debtor V & D Wholesale, Inc. Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Description of the property	Date	Value of property
5.1. Creditor's name _____  Street _____  City _____ State _____ ZIP Code _____	_____	_____	\$ _____
5.2. Creditor's name _____  Street _____  City _____ State _____ ZIP Code _____	_____	_____	\$ _____

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____  Street _____  City _____ State _____ ZIP Code _____	_____	_____	\$ _____
_____	_____	_____	_____
Last 4 digits of account number: XXXX- _____	_____	_____	_____

**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. _____	_____	Name _____	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____	_____	Street _____	_____
_____	_____	City _____ State _____ ZIP Code _____	_____
Case title _____	_____	Court or agency's name and address _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. _____	_____	Name _____	_____
Case number _____	_____	Street _____	_____
_____	_____	City _____ State _____ ZIP Code _____	_____

Debtor

**V & D Wholesale, Inc.**

Name

Case number (if known) \_\_\_\_\_

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None

Custodian's name and address	Description of the property	Value
Custodian's name		\$ _____
Street	Case title	Court name and address
City State ZIP Code	Case number	Name Street
	Date of order or assignment	City State ZIP Code

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000** None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$ _____
Street			
City State ZIP Code			
Recipient's relationship to debtor			
9.2. Recipient's name			\$ _____
Street			
City State ZIP Code			
Recipient's relationship to debtor			

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.** None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Date of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		\$ _____
			\$ _____

Debtor

**V & D Wholesale, Inc.**

Name

Case number (if known) \_\_\_\_\_

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Pacheco & Lugo, PLLC  Address  340 Atlantic Avenue Street  Brooklyn, NY 11201 City                      State                      ZIP Code		09.11.2020	\$ 2,600
	Email or website address  cpacheco@pachecolugo.com			
	Who made the payment, if not debtor?	Sindha Mahendrasinh		
	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.				\$ _____
	Address  Street  City                      State                      ZIP Code			
	Email or website address  _____			
	Who made the payment, if not debtor?	_____		

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
_____	_____	_____	\$ _____
Trustee  _____	_____		

Debtor V & D Wholesale, Inc.  
Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
------------------------	--	------------------------	-----------------------

13.1. \_\_\_\_\_ \$ \_\_\_\_\_

**Address**

Street  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Relationship to debtor**

\_\_\_\_\_

**Who received transfer?**

\_\_\_\_\_ 0 \$ \_\_\_\_\_

13.2. \_\_\_\_\_

**Address**

Street  
\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Relationship to debtor**

\_\_\_\_\_

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy
14.1. Street _____	From _____ To _____
City _____ State _____ ZIP Code _____	
14.2. Street _____	From _____ To _____
City _____ State _____ ZIP Code _____	

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

### **Part 8: Health Care Bankruptcies**

#### **15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
<b>15.1.</b>		
Facility name		
Street	<b>Location where patient records are maintained</b> (if different from facility address). If electronic, identify any service provider.	
City                    State                    ZIP Code		
<b>Check all that apply:</b>		
<input type="checkbox"/> Electronically <input type="checkbox"/> Paper		
<b>Facility name and address</b>		
<b>Nature of the business operation, including type of services the debtor provides</b>		
<b>If debtor provides meals and housing, number of patients in debtor's care</b>		
<b>15.2.</b>		
Facility name		
Street	<b>Location where patient records are maintained</b> (if different from facility address). If electronic, identify any service provider.	
City                    State                    ZIP Code		
<b>Check all that apply:</b>		
<input type="checkbox"/> Electronically <input type="checkbox"/> Paper		

### **Part 9: Personally Identifiable Information**

#### **16. Does the debtor collect and retain personally identifiable information of customers?**

No.

Yes. State the nature of the information collected and retained. \_\_\_\_\_

Does the debtor have a privacy policy about that information?

- No
- Yes

#### **17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

No. Go to Part 10.

Yes. Does the debtor serve as plan administrator?

- No. Go to Part 10.
- Yes. Fill in below:

**Name of plan**

**Employer identification number of the plan**

EIN: \_\_\_\_\_

Has the plan been terminated?

- No
- Yes

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	JPMorgan Chase Name P.O. Box 18251 Street  Columbus, OH 43218 City      State      ZIP Code	XXXX- <u>6</u> <u>1</u> <u>2</u> <u>0</u>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	3/03/2020	\$ <u>3,283.72</u>
18.2.	Name  Street  City      State      ZIP Code	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other n/a	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Street	_____	_____	
City      State      ZIP Code	Address _____	_____	

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name	_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes
Street	_____	_____	
City      State      ZIP Code	Address _____	_____	

Debtor V & D Wholesale, Inc. Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

### **Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

#### **21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	_____
City _____ State _____ ZIP Code _____			

### **Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

#### **22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No

Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

#### **23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____ Street _____ City _____ State _____ ZIP Code _____	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____

Debtor V & D Wholesale, Inc. Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

## 24. Has the debtor notified any governmental unit of any release of hazardous material?

- No  
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____	_____	_____

**Part 13: Details About the Debtor's Business or Connections to Any Business**

## 25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ - _____ - _____ <b>Dates business existed</b> From _____ To _____
25.2. Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ - _____ - _____ <b>Dates business existed</b> From _____ To _____
25.3. Name _____ Street _____ City _____ State _____ ZIP Code _____	_____	EIN: _____ - _____ - _____ <b>Dates business existed</b> From _____ To _____

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

None

Name and address		Dates of service	
26a.1. Tayal Rajesh Name S Grover, CPA, PLLC Street 183 Broadway Suite 208 Hicksville, NY 11801 City		From 2015	To 2019
State	ZIP Code		

Name and address		Dates of service	
26a.2. _____ Name Street _____		From _____	To _____
City	State	ZIP Code	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

None

Name and address		Dates of service	
26b.1. _____ Name Street _____		From _____	To _____
City	State	ZIP Code	

Name and address		Dates of service	
26b.2. _____ Name Street _____		From _____	To _____
City	State	ZIP Code	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

None

Name and address		If any books of account and records are unavailable, explain why	
26c.1. Tayal Rajesh Name S Grover, CPA, PLLC Street 183 Broadway Suite 208 Hicksville, NY 11801 City		_____ _____ _____	
State	ZIP Code		

Debtor V & D Wholesale, Inc. \_\_\_\_\_ Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

**Name and address****If any books of account and records are unavailable, explain why**

26c.2.

Name \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None**Name and address**

26d.1.

Name \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**Name and address**

26d.2.

Name \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

 No Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

\$ \_\_\_\_\_

**Name and address of the person who has possession of inventory records**

27.1.

Name \_\_\_\_\_

Street  
\_\_\_\_\_  
\_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**Debtor**

V & D Wholesale, Inc.

Name

Case number (*if known*)

Debtor V & D Wholesale, Inc. Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**Name and address of recipient**

30.2 \_\_\_\_\_

Name \_\_\_\_\_  
 Street \_\_\_\_\_  
 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Relationship to debtor**

\_\_\_\_\_

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No

Yes. Identify below.

<b>Name of the parent corporation</b>	<b>Employer Identification number of the parent corporation</b>
_____	EIN: _____ - _____ - _____ - _____ - _____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No

Yes. Identify below.

<b>Name of the pension fund</b>	<b>Employer Identification number of the pension fund</b>
_____	EIN: _____ - _____ - _____ - _____ - _____

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 09/11/2020  
 MM / DD / YYYY

/s/ Mahendrasinh Sindha Printed name Mahendrasinh Sindha

Signature of individual signing on behalf of the debtor

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- No  
 Yes

Debtor

V &amp; D Wholesale, Inc.

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5a.

\$ 0

5b. Total claims from Part 2

5b.

+ \$ 65,000

5c. Total of Parts 1 and 2

5c.

\$ 65,000

Lines 5a + 5b = 5c.